



STATE OF WASHINGTON  
DEPARTMENT OF SOCIAL AND HEALTH SERVICES  
DIVISION OF DEVELOPMENTAL DISABILITIES  
*PO Box 45310 · Olympia, WA 98504-5310*

Date

<Name>  
<Address Line 1>  
<Address Line 2>  
<City>, <State> <Zipcode>

Subject: Changes to DDD Eligibility Rules

Dear <Name>:

I would like you to be aware that on July 5, 2005, the rules that are used by the Division of Developmental Disabilities (DDD) to determine whether someone qualifies to be a client of DDD are changing.

Adults over the age of 18, who are currently receiving paid services from DDD, will not be affected by these changes.

I am enclosing a fact sheet about the changes. We want you to know what we are doing to make the rules and the eligibility process clearer and easier to use.

If any of the changes affect you, DDD will notify you at least 90 days in advance.

You may, as always, call your regional office if you have any additional questions.

Sincerely,

A handwritten signature in cursive script, reading "Linda Rolfe", written in black ink.

Linda Rolfe, Director

CC: Fact sheet enclosure  
Translation sheet